PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OI			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			19				I	RATE	FEE	İ	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			\9 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 mir	nus 3 =	*			X42=		OR	X84=	
MU	ILTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL	377	OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
_	THE STATE OF THE S	(Column 1)	Fris Observations	(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42≈		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM			+140=		OR	+280=	
	TOTAL										TOTAL	
								ADDIT. FEE	·	OR	ADDIT. FEE	
		(Column 1) CLAIMS	174-1383	(Colur		(Column 3)	1 ,	-				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42≈		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							ا ا	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	Ob :	HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X42≈			X84=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT		CLAIM		J ∤	- · · · -		OR		97
# If the patricia polyment is less than the patricia polyment 0 units 100 in polyment 0										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
	The "Highest Nun						er fou	ind in the and	oropriate bo	x in co	lumn 1.	